



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E446567**

INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input checked="" type="checkbox"/>

TRIBAL RESERVATION ☐

CASE # **15-01878**

LOCAL AGENCY CODING

TOTAL # OF UNITS **02** OBJECT STRUCK

DATE OF COLLISION **07** - **26** - **2015** TIME (2400) **1745** COUNTY # **31** MILES **0664** CITY # **0664**

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ NON-INTERSECTION ☒

STATE ROUTE **9 NE** BLOCK NO. ☒ **717** MILE POST

DISTANCE ☐ MILES ☐ FEET ☐ OF (REFERENCE OR CROSS STREET)

UNIT 01 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☐ NO ☐ PHONE

LAST NAME **UNKNOWN** FIRST NAME MIDDLE INITIAL

STREET NEW ADDRESS

CITY ST ZIP

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # STATE SEX **U** D.O.B. **MMDDYYYY**

ON DUTY ☐ STATUS AIRBAG **9** RESTR. **9** EJECT **9** HELMET USE **9** INJURY CLASS **0** NATURE OF INJURIES

LICENSE PLATE # STATE VIN#

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR MAKE MODEL STYLE VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐ INSURANCE CO & POLICY # CITATION # CHARGE

VEHICLE LEGALLY STANDING YES ☐ NO ☐



UNIT 02 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE **D: 4259318577**

LAST NAME **YURKOVITCH** FIRST NAME **MEL** MIDDLE INITIAL **T**

STREET NEW ADDRESS **2528 101ST AVE NE**

CITY **LAKE STEVENS** ST **WA** ZIP **98258**

CDL RESTRICTIONS ENDORSEMENTS

DRIVER'S LICENSE # **YURKOMT173DE** STATE **WA** SEX **U** D.O.B. **03** - **05** - **1983**

ON DUTY ☐ STATUS AIRBAG **2** RESTR. **9** EJECT **1** HELMET USE **9** INJURY CLASS **1** NATURE OF INJURIES

LICENSE PLATE # **AKF1438** STATE **WA** VIN# **JH4CL95808C018964**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2006** MAKE **ACUR** MODEL **TSX** STYLE **4D** VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. **MEL YURKOVITCH 2528 101ST AVE NE LAKE STEVENS WA 98258 D: 4259318577**

LIABILITY INSURANCE IN EFFECT ☐ INSURANCE CO & POLICY # **STATE FARM 362 4941-B28-47** CITATION # CHARGE

VEHICLE LEGALLY STANDING YES ☐ NO ☐



OFFICER'S NAME (PRINT) **C. LYONS #0134** BADGE OR ID # **0134** AGENCY **WA0311900**



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E446567**

CASE # **15-01878**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #												SEX	D.O.B. MMDDYYYY					
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES			
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #												SEX	D.O.B. MMDDYYYY					
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES			
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #												SEX	D.O.B. MMDDYYYY					
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES			

NARRATIVE

Vehicle #2 was legally parked in Safeway parking lot and was hit by an unknown vehicle. Based on the damage, Vehicle #1 was backing out of adjacent stall and struck Vehicle #2.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

C. LYONS #0134

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

07-27-15 06:21 AM

DATED

PLACE SIGNED

APPROVED BY

DATE

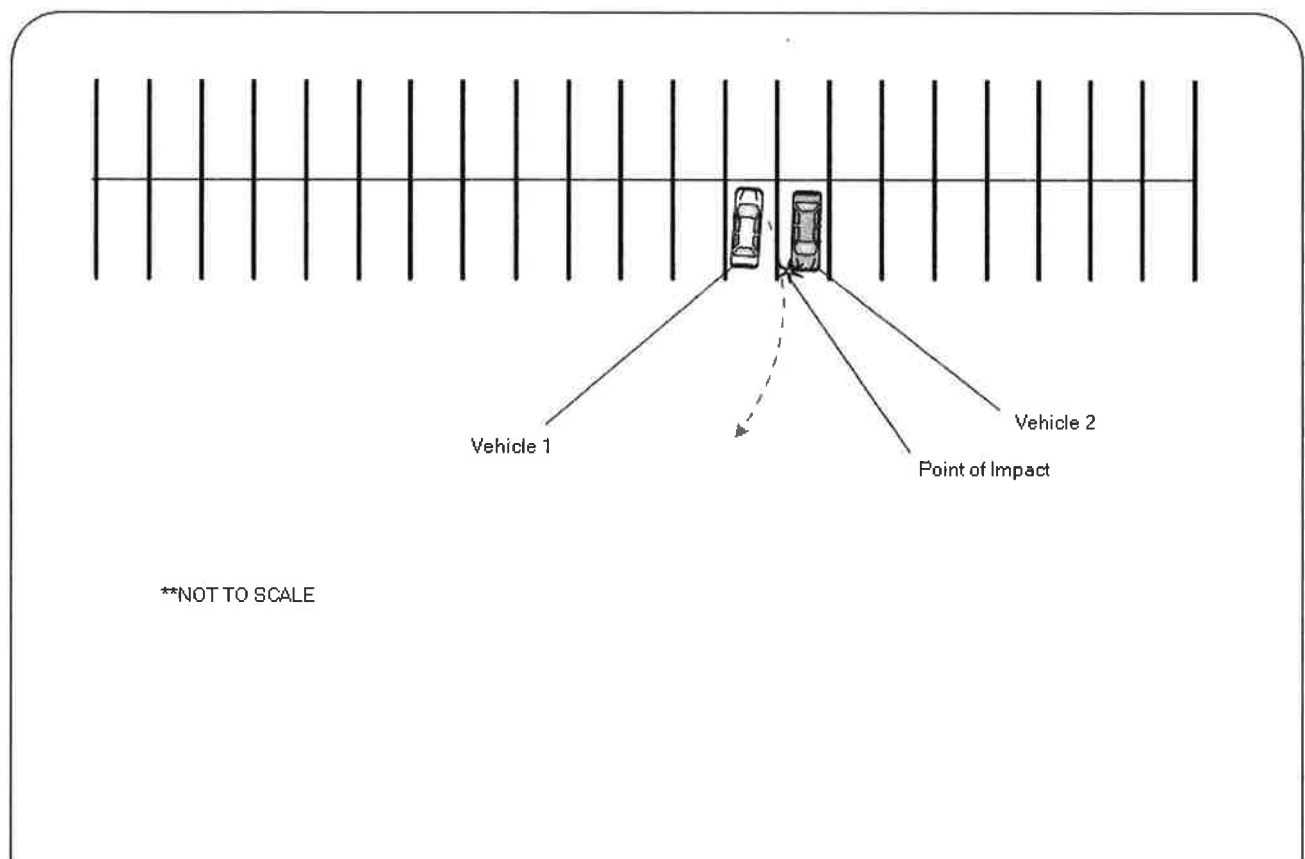
BOB SUMMERS 079

7/28/2015 9:01:00 AM

BADGE OR ID #	0134	ORI #	WA0311900	TIME POLICE DISPATCHED	6:36 PM	TIME POLICE ARRIVED	6:45 PM
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Parking lot 717 SR 9 NE



LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

15-01870

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Yurkovitch m-e-l T	RACE W	ETH	SEX M	DOB 3-5-83	AGE 32	HGT 5'11	WGT 220	HAIR B	EYES B
STREET ADDRESS 2528 101ST AVZ NE		CITY LAKE STEVENS		STATE WA		ZIP 98295		RES. STATUS		
HOME PHONE		CELL PHONE 425-931-8577		PLACE OF EMPLOYMENT NONE						
WORK PHONE		EMAIL ADDRESS								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

WENT INTO Safeway TO GET some Food
came out half hour Later TO see That my
car Had been Hit in the front Bumper

LSPPD
ORIGINAL

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: m-e-l Yurkovitch	DATE SIGNED 7-26-15	LOCATION SIGNED Lake Stevens
OFFICER/NUMBER: #134	DATE SIGNED 7/26/15	LOCATION SIGNED Lake Stevens

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

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LSPD
ORIGINAL

15-01878

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LSPD
ORIGINAL

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LSPD
ORIGINAL

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LSND
ORIGINAL

Case # 15-01878

LAKE STEVENS POLICE EVIDENCE UNIT				Primary Officer/Badge Number <i>C. Lyons #134</i>				Case Number <i>15-01878</i>			
Type of Crime: <u>Felony / Misdemeanor (Circle)</u>				Type of Case: <i>Collision</i>				Date/Time: <i>7/27/15, 200</i>			
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING				*Evi will be held until court dispo or when the Statute of Limitations has expired *Found and Sfg will be held for 60 days or 60 days past owner notification							

Item # <i>06-1</i>	Item <i>CD pics of car damage</i>					Brand Name	Storage Location	Disposition
	Brand/Model/Caliber							
	(Further Description)							
Action # <i>3</i>	Serial #		Where Found		Weight of Narcotic			
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions								

Item #	Item					Brand Name	Storage Location	Disposition
	Brand/Model/Caliber							
	(Further Description)							
Action #	Serial #		Where Found		Weight of Narcotic			
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions								

Item #	Item					Brand Name	Storage Location	Disposition
	Brand/Model/Caliber							
	(Further Description)							
Action #	Serial #		Where Found		Weight of Narcotic			
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions								

Item #	Item					Brand Name	Storage Location	Disposition
	Brand/Model/Caliber							
	(Further Description)							
Action #	Serial #		Where Found		Weight of Narcotic			
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions								

Item #	Item					Brand Name	Storage Location	Disposition
	Brand/Model/Caliber							
	(Further Description)							
Action #	Serial #		Where Found		Weight of Narcotic			
Owner's Name		Address		City	State	Zip	Phone #	Barcode goes here
Owner Signature/Other remarks /additional information/ special instructions								

Evidence Control Use Only:									
Received by Evidence:		NCIC/WACIC	✓	Date:	CAD/RMS Checked	ROUTING: _____			
Name: _____ # _____		NCIC/WACIC +		Date:	Owner Letter Sent:	White: Property Room			
Date: _____ Time: _____		NCIC/WACIC -		Date:	Owner Letter Sent:	Yellow: Case File			

Incident History for: #SS15014895

Case Numbers: \$SS15001878

Entered 07/26/15 18:36:20 BY SPCT05 SP0397
Dispatched 07/26/15 18:37:20 BY SPDP17 SP0320
Enroute 07/26/15 18:37:20
Onscene 07/26/15 18:45:24
Closed 07/26/15 19:15:30

Initial Type: COL Initial Alarm Level: Final Alarm Level:

Final Type: COL (COLLISION, NON-PRIORITY) Pri: 3 Dispo: H

Police BLK: SS002 Fire BLK: AG1518 Map Page: 397E-1 Group: SS1 Beat: WEST

Src: T

Loc: 717 SR 9 NE , LKS -- SAFEWAY , LKS btwn ENT TO FRONTIER VI & LUNDEEN PARK WY
(V)

Loc Info: NEAR VERIZON STORE

Name: YURKOVITCH THOMAS

Addr:

Phone: 4259318577

/1836 (SP0397) ENTRY , CC, COLD H/R, NS, RP IN GRY ACURA TSX
/1837 (SP0320) DISPER 19N1 #SS134 LYONS, OFFICER (CHRIS)
#SS105 IRWIN, OFFICER (DENNIS)
/1845 ONSCNE 19N1
/1848 ASNCAS 19N1 \$SS15001878
/1850 \$PREMPT 19N1
/1853 DISPOS 19N1 #SS134 LYONS, OFFICER (CHRIS)
#SS105 IRWIN, OFFICER (DENNIS)
/1915 (SS134) *CLEAR 19N1 D/H
/1915 CLOSE 19N1

LSPD
ORIGINAL